

### STATE OF NEW HAMPSHIRE

### 2019 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

PLEASE PRINT

1. Name of Lobbyist(s) <u>Jenniter Frizzell</u>
II. Name of lobbyist's partnership, firm or corporation, if any:
NH Women's Foundation (Name of partnership, firm or corporation)
Business Address: (Street)  (Name of partnership, firm of corporation)  (Name of partnership, firm of corporation)  (State)  (State)  (Sing Code)
(603 226,3355 () e-mail Jennifer@nhwomensfound
III. This statement covers: (Choose one – file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client).
All reportable transactions occurring in the months prior to the reporting date relative to the following client:
NH Women's Foundation (Full Name of Client as it appears on the Lobbyist Registration Form)
OR
All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client.
IV. Date of Report April 24, 2019  Reports cover: activity from date of registration to 3/31/19  April 24, 2019  July 31, 2019  activity from 4/1/19 to 6/30/19
October 30, 2019
activity from 7/1/19 to 9/30/19 activity from 10/1/19 to 12/31/19
V. There have been no fees received and no reportable transactions made since the last report.   If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 03301.
VI. Check if additional reports are attached:
If you have received fees or made expenditures, you must file Addendum A- Fees and Expenses
If you have paid an honorarium or reimbursed expenses, you must file <b>Addendum B</b> - Report of Honorariums or Expense Reimbursement
If you, your firm, or your family has made political contributions, you must file Addendum C- Political Contributions
Sworn Statement/Affirmation by Lobbyist  I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief.  (Signature of lobby)st)    Jennifer L. Frizze
APR 2 4 2019
NEW HAMPSHIRE DEPARTMENT OF STATE

# P L E A S E P R I N T

## STATE OF NEW HAMPSHIRE

# Lobbyists Fees and Expenses Addendum A



(RSA Chapter 15:6)

1. Name of Lobbyist(s) <u>Jennifer Frizzell</u>	
II. Name of lobbyist's partnership, firm or corporation, if any:	
employed by NH Women's Four	ndation
(Name of partylership, firm or corporation)  III. Name of Client <u>NH Women'S Foundation</u>	Date4/24/20/9
Iv. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:  pro-rated porter	relations, or public relations services oss fee amount reported shall not be
a) Total of all fees received in this reporting period of INCOME	a)s # 1,050
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year).	
c) Total of all fees received to date (Add lines a and b)	c)\$ #1,050 00
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of the Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lessing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm aggregate total of all expenses paid expenses; (b) the aggregate total of alle: meals purchased during a business than \$10 that is given to the person of with a value of \$25.00 or less); and orting period of greater than \$25.00 for the of greater than \$25, but not greater than \$50, expense reimbursement, or politica
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$
b) Total aggregate of expenditures during this reporting period , not reported in a), of \$25 or less.	b) \$
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$Q
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	08
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from leading period, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
None	\$
	\$
	\$
	\$
·	\$
	\$
	·
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information
(Signature of lobbyist)	4 24 2019 (Date)
Jennifer Frizzell (Print Name of lobbyist)	

### STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

I. Name of Lobbyist(s)	Vennite	r 1 1 1 2 2 2 1 1	
<b>Political Contributions</b>	white lirm or corporation)  WO Men 'S F  on that is reportable	en's Founda Ovindation pursuant to RSA Chap	Date $\frac{4/24/2019}{2019}$
	(Last Name)  Contribution, provide ibution on the line abo	(First Name)  Office Candidate i a description of the good	(Middle Name/Initial)  s Seeking State Semate  ds or services provided, and enter the ution. If the actual cost is not known,
enter an estimated value and th	e word "estimate."		
Full name of candidate:			
		(First Name)	(Middle Name/Initial)
		(First Name)Office Candidate is	
Full name of candidate:  Amount of contribution \$	(Last Name)  I contribution, provide ibution on the line abo e word "estimate."	Office Candidate is a description of the good ve for amount of contribution	ds or services provided, and enter the ution. If the actual cost is not known,
Full name of candidate:  Amount of contribution \$	(Last Name) I contribution, provide ibution on the line abo e word "estimate."	Office Candidate is a description of the good we for amount of contributions.	s Seekingds or services provided, and enter the

			· —
(If more than three contri	butions were made, report additional contr	ibutions on separate addendum C forms.)	<del></del>
Sworn Statement/A	ffirmation by Lobbyist	•	
	RSA 15-B and RSA 664 and heret to the best of my knowledge and b	y swear or affirm that the foregoing info	rmation
W	mel	4/24/2019	

,